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MAY 05 2005

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21002 7590 03/30/2005

WILLIAM NITKIN
1320 CENTRE STREET
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NEWTON, MA 02459

05/06/2005 WABDEL3 00000148 10814444

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William Nitkin	(Depositor's name)
	(Signature)
May 3, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/814,444	03/31/2004	Marshall E. Deutsch	112,823	5463

TITLE OF INVENTION: ARTIFICIAL HUMAN FECES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	06/30/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
WALLENHORST, MAUREEN	1743	436-066000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 William Nitkin

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

NERL Diagnostics

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

East Providence, Rhode Island

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
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- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date May 3, 2005

Typed or printed name William Nitkin

Registration No. 27,220

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

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May 3, 2005

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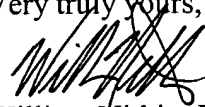
In Re the Application of:
Marshall E. Deutsch
Serial No. 10/814,444
Filed: 03/31/2004
For: Artificial Human Feces

Date of Notice of
Allowance: 03/30/2005

Dear Sir:

Attached hereto please find completed Issue Fee Transmittal Form PTOL-85 Part B along with check for \$1,430.00 representing issue fee of \$1,400.00 and \$30.00 for copies. Kindly forward the attached postcard stating date of receipt of the above material. Thank you.

Very truly yours,

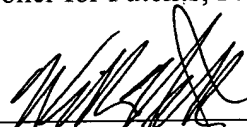

William Nitkin, Registration No. 27,220

WN/ra
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